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Phone:		Date:	September 15, 2005
Re:	10/601,144	CC:	

Applicants: Bhullar et al.
Serial No.: 10/601,144
Filed: June 20, 2003
Entitled: Method of Making Biosensor
Group: 3729
Ref. No.: BMID 9958 CIP US

Attachments:

- Transmittal Form (1pp)
- Reply in Response to Restriction Requirement (7pp)
- Fax Transmittal Sheet (1pp)

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PTO/SS/21 (09-04)

Approved for use through 07/31/2006. CMB 0851-0031

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/601,144	
	Filing Date	06-20-2003	
	First Named Inventor	Bhullar	
	Art Unit	3720	
	Examiner Name	Arbes	
Total Number of Pages in This Submission	9	Attorney Docket Number	BMD 9958 CIP US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Transmittal (1pp)
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	The Law Office of Jill L. Woodburn, LLC		
Signature	<i>Jill L. Woodburn</i>		
Printed name	Jill L. Woodburn		
Date	Sept. 15, 2005	Reg. No.	39,874

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>Jill L. Woodburn</i>		
Typed or printed name	Jill L. Woodburn	Date	09-15-2005

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Docket No. BMID 9958 CIP US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Bhullar et al.

Application No.: 10/601,144

Group No.: 3729

Filed: June 20, 2003

Examiner: Arbes, Carl J

For: Method of Making Biosensor

REPLY IN RESPONSE TO RESTRICTION REQUIREMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INTRODUCTORY COMMENTS

In response to the Office Action mailed June 15, 2005, entry of the amendments and consideration of the accompanying remarks is respectfully requested.